

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|------------------|------------------------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | TN | 32 P20 625 | 5/25 07 11 01 10-12-01 |
| RESPONSE FORMALITY REVIEW | M-H | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|-------|---------|
| 1 | 10/4/01 |
| 2 | ✓✓ |
| 3 | ✓✓✓ |
| 4 | ✓✓✓✓ |
| 5 | ✓✓✓ |
| 6 | ✓✓✓ |
| 7 | ✓✓✓✓ |
| 8 | ✓✓✓ |
| 9 | ✓✓✓ |
| 10 | ✓✓= |
| 11 | ○○= |
| 12 | ○○= |
| 13 | ○○= |
| 14 | ✓○= |
| 15 | ✓○= |
| 16 | ○○= |
| 17 | ○○= |
| 18 | ✓✓= |
| 19 | NNN |
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| 49 | NNN |
| 50 | NNN |

| Claim | Date |
|-------|---------|
| 51 | 10/4/01 |
| 52 | NNN |
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| Claim | Date |
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| 101 | NNN |
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If more than 150 claims or 10 actions
staple additional sheet here

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